

IDAHO EMERGENCY MEDICAL SERVICES BUREAU

EDUCATION STANDARDS MANUAL

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II. Definitions

<u>Approved Course</u>: An education course for initial or refresher education that has been approved as meeting the standards established by the EMS Bureau.

Approved Curriculum: A course of study approved by the State Health Officer.

<u>Approved Instructor</u>: An individual who has met instructor standards, applied for and been approved by the EMS Bureau for the level of course being taught.

<u>Bridge Course</u>: The Idaho EMS approved EMR to EMT bridge education course or other course designed to "bridge" a content gap between courses that have similar or overlapping objectives.

<u>Certification Examination</u>: A test of entry level knowledge corresponding to the level of certification sought which is approved by the State Health Officer.

<u>Clinical Education</u>: The education component within an approved course where the student learns to apply the course objectives in the clinical environment, under the direct supervision of a preceptor.

<u>CoAEMSP</u>: Committee on the Accreditation of Educational Programs for EMS Professions

<u>Course Beginning Roster</u>: Official course record submitted to the EMS Bureau with the names of students who are enrolled in a course.

<u>Course Completion Record</u>: Official course record submitted to the EMS Bureau following completion of course with a list of students' who successfully completed the course.

<u>Course Coordinator</u>: A representative of the sponsoring entity responsible for overall administrative management of an approved course.

<u>Course Physician</u>: A physician with oversight responsibilities for EMS Bureau approved education courses as described within this manual.

<u>Course Tracking Number</u>: A unique number assigned by the EMS Bureau for each initial and refresher education course, also used to identify the course on the NREMT EdNet web site.

EdNet: The National Registry of EMT's web based educational network found at www.nremt.org.

<u>Emergency Medical Services (EMS)</u>: The services utilized in responding to a perceived individual need for immediate care in order to prevent loss of life or aggravation of physiological or psychological illness or injury.

<u>Emergency Medical Services (EMS) Bureau</u>: The Emergency Medical Services (EMS) Bureau of the Idaho Department of Health and Welfare.

<u>EMS Agency</u>: An organization licensed by the EMS Bureau to provide emergency medical services in Idaho.

EMS Physician Commission: Governing body for defining the scope of practice of licensed EMS

personnel and the level of required supervision by a physician.

<u>Field Internship</u>: Using "hands-on" practical application of skills and knowledge within an approved course; the student is evaluated and mentored by a qualified preceptor while performing actual EMS patient care in the field.

<u>Guest Lecturer</u>: An individual utilized in an educational program for the delivery of specific information based upon having expertise associated with the educational objectives being taught.

<u>Idaho Standard Curriculum (ISC)</u>: The curriculum based on the 1995 First Responder, 1994 EMT-Basic, 1985 EMT-Intermediate and 1998 EMT-Paramedic National Standard Curricula.

<u>Idaho EMS Curriculum (IEC)</u>: The curriculum based on the 2009 National Education Standards.

<u>Make-Up Education</u>: Additional education session(s) completed prior to course ending date for any students that missed a scheduled class and associated course objectives.

<u>National Registry of Emergency Medical Technicians (NREMT)</u>: An independent, non-governmental, not-for-profit registration organization, which prepares validated examinations for state's use in evaluating candidates for certification. NREMT does not provide licensure.

<u>Patient Contact</u>: Assessment and/or treatment provided to an EMS patient by an EMS student supervised in a clinical or field internship setting.

<u>Pearson VUE</u>: Privately operated test centers which are contracted by NREMT to provide computer testing for the EMR, EMT, AEMT and Paramedic.

<u>Preceptor</u>: An individual oriented to the scope of practice and objectives of a specific education course who provides direct supervision and evaluation in a clinical or field internship educational setting.

<u>Primary Instructor</u>: An EMS Bureau approved instructor identified on a course application who has specific course responsibilities.

Optional Module (OM) Education: Education related to skills and interventions designated by "OM" in Appendix A of the EMSPC Standards Manual.

<u>Refresher Education Course</u>: An EMS Bureau approved, standardized modular educational program used in Idaho to meet the license renewal requirements for the EMR, EMT and AEMT that is based upon the objectives of the initial education curriculum and includes a structured evaluation of those objectives.

<u>Remedial Education</u>: Additional education session(s) completed prior to course ending date for any students that failed to achieve course objectives.

Sponsoring Entity: Organizations eligible to host and conduct EMS educational program(s).

State Health Officer (SHO): The administrator of the Division of Public Health.

<u>Student</u>: An individual meeting all education course prerequisites and actively enrolled in an approved education course.

<u>Successful Completion</u>: A favorable (passing) review by the primary instructor for an education course verifying that the candidate has met all EMS Bureau education requirements and course specific criteria.

<u>Transition Course</u>: A course defined by the EMS Bureau that is intended to educate personnel with predefined knowledge and skills competencies about new skill, intervention and competency requirements within the same level of licensure.

III. Educational Program Components

The following standards define the minimum components necessary to conduct an Idaho EMS education course.

- A. Each EMS Bureau approved course must be conducted by a sponsoring entity. Sponsoring entities for EMS Bureau approved courses are:
 - 1. A currently licensed Idaho EMS agency,
 - 2. An organization demonstrating compliance with rules established by the State of Idaho Department of Education, or
 - 3. A recognized governmental entity within the State of Idaho.
- B. Responsibilities of the sponsoring entity are:
 - 1. Ensure compliance with the standards listed within this manual,
 - 2. Possession of written clinical and internship agreements with facilities or EMS agencies appropriate for the specific curriculum clinical objectives,
 - 3. To ensure that all students are presented with a course of study consistent with the curriculum approved by the SHO and the standards established within this document,
 - 4. Assumption of the risks and liabilities associated with the presentation of the education program, and
 - 5. Maintenance of all education records for a minimum of five (5) years.
- C. All courses approved by the EMS Bureau will have the following:
 - 1. A Course Coordinator with the following:
 - a. Qualifications:
 - 1. Completion of an Idaho EMS Bureau Instructor Orientation course within the last twenty-four (24) months, and

b.Responsibilities:

- 1. Serve as the primary contact for the EMS Bureau and NREMT,
- 2. Represent the sponsoring entity and provide all administrative oversight of the education program,
- 3. Provide the educational resources necessary for teaching all of the objectives within the specific curriculum,
- 4. Ensure compliance with all administrative and educational standards listed in this manual.
- 5. Advance scheduling and prior orientation of all other instructors and guest lecturers to the knowledge and skills objectives of the session being taught,
- 6. Schedule and coordinate all of the educational components,
- 7. Develop, maintain and ensure all course policies and procedures are followed, to include:
 - a. Pass/Fail criteria
 - b. Skill proficiency, and
 - c. Attendance requirements.
- 8. Maintenance of student files documenting individual progress and eligibility for enrollment, completion and exams,
- 9. Complete, record, submit, and maintain all course documentation as

- required within this manual, and
- 10. Enter all course data necessary for registration of the course with NREMT. (Appendix C)
- 2. Each course will have a designated primary instructor and sufficient assistant or skill instructors approved at the level of course conducted to ensure no greater than a six to one (6:1) student to instructor ratio for psychomotor portions of the course.
- 3. Primary instructor responsibilities include:
 - 1. Delivery of classroom and "hands-on" lessons,
 - 2. Reviewing and monitoring of all assistant instructors and guest lecturers to ensure compliance with the course objectives,
 - 3. Orientation of all guest lecturers, clinical preceptors and field internship preceptors to the specific course objectives,
 - 4. Orientation to all students to the Idaho certification, examination and licensing procedures,
 - 5. Evaluation of student performance and competency during didactic education, clinical rotations and field internships, and
 - 6. Documentation of student performance and competency.
 - b. Assistant Instructor responsibilities include:
 - 1. Training of students in skill objectives,
 - 2. Evaluation of student performance and competency,
 - 3. Documentation of student performance and competency, and
 - 4. Assisting the primary instructor as directed.
- 4. All IEC courses and AEMT and Paramedic level ISC courses must have a designated Course Physician with the following:
 - a. Qualifications:
 - 1. Must be oriented to the scope of practice of the EMS students, and
 - 2. Must hold a current, active license issued by the Idaho Board of Medicine to practice medicine and surgery or osteopathic medicine or surgery in Idaho and be in good standing with no restriction upon or actions taken against his/her license.
 - b. Responsibilities:
 - 1. Verify student competency and completion of all course objectives through formal review, examination or evaluation by the course physician or their designee,
 - 2. Approve all guest lecturers, clinical and field preceptors,
 - 3. Approve all clinical and field internship facilities, and
 - 4. Ensure appropriate medical supervision for students participating in clinical and internship education through collaboration with EMS Medical Directors, Hospital Supervising Physicians and/or Medical Clinic Supervising Physicians.
- 5. Guest Lecturers. Any course may use guest lecturers to present portions of the curriculum.
 - a. Guest lecturers must have education credentials and experience consistent with the course objectives they teach, and
 - b. The course physician must approve guest lecturers for all AEMT and Paramedic courses.

- D. Education programs will have access to all equipment and educational aids necessary to teach all objectives within the curricula. (Appendix E)
- E. All classroom facilities used for EMS educational programs are required to be conducive to a learning environment as defined in the curriculum.
- F. All clinical facilities are required to be compatible with and appropriate for the objectives of the specific curriculum.
 - 1. The course physician must approve clinical facilities for all IEC courses and ISC AEMT and Paramedic courses.
 - 2. The sponsoring entity is responsible for securing and maintaining written agreements with clinical facilities.

G. All courses must be:

- Conducted according to the approved curricula in alignment with the EMSPC Scope of Practice for that level and the EMS Bureau Education Standards Manual in effect when the course is approved.
- 2. Sponsoring entities wanting to conduct a course for initial licensure or refresher education using an unapproved curricula must submit the compiled curriculum to the EMS Bureau for approval prior to conducting the course.
 - a. The sponsoring entity must submit a comparison review of the proposed curriculum objectives to the approved curriculum objectives.
 - b.The EMS Bureau or designee will review the proposed curriculum.
 - c. The EMS Bureau will notify the sponsoring entity of the review outcome.
- H. All training identified by the EMS Physician Commission as optional with specific training required must be conducted according to the approved curriculum.
- I. All Landing Zone Officer (LZO) training required for licensed EMS providers and initial education courses must be conducted according to the Landing Zone Officer: Safe Utilization of Air Medical Helicopters training program approved by the EMS Bureau.

IV. Educational Program Administrative Requirements

To receive approval from the EMS Bureau, all EMS courses must be compliant with the administrative requirements described in this section. The course coordinator, primary instructor, assistant instructor(s) and course physician share responsibility for ensuring compliance with these requirements.

- A. All courses require application prior to conducting the education.
 - 1. Submit course applications to the EMS Bureau via e-mail to EMSCourses@dhw.idaho.gov.
 - 2. The most current versions of the standardized forms are available on the EMS Bureau website at www.IdahoEMS.org.
 - 3. The EMS Bureau will issue course approval via e-mail.
- B. The course coordinator is responsible for submission of records to the sponsoring entity and EMS

Bureau.

- C. The sponsoring entity is required to maintain complete official course documentation in paper or electronic format for four (4) years from course completion, which includes:
 - 1. A copy of the original course application as submitted to the EMS Bureau,
 - 2. A copy of the course approval issued by the EMS Bureau,
 - 3. Documentation of student compliance with all required prerequisites for the level of the course,
 - 4. A copy of the course beginning roster as submitted to the EMS Bureau,
 - 5. A master course schedule to include:
 - a. Documentation of canceled, modified or added classes, and
 - b. Dates, times, instructor and location changes.
 - 6. A class attendance roster for each session, to include:
 - a. The dates individual classes were held,
 - b. Lesson number(s),
 - c. Signatures of attending students, and
 - d. Instructor(s) signatures.
 - 7. A list of make-up session(s) to include:
 - a. Session date(s),
 - b. Lesson plan objectives,
 - c. Verification of the accomplishment of objective(s) for each student participating, and
 - d. Instructor(s) signatures.
 - 8. Documentation of remediation conducted for any student who by written examination or skill evaluation failed to demonstrate achievement of an objective during regularly scheduled class time, to include:
 - a. The objective(s) being remediated,
 - b. Date of session(s),
 - c. An evaluation demonstrating achievement of the objective(s),
 - d. Student(s) and instructor(s) signature.
 - 9. Individual skill evaluation(s) that document:
 - a. Student performance for each specific psychomotor objective contained in the curriculum,
 - b. Pass/fail criteria.
 - c. Student name,
 - d. Individual score, and
 - e. Date administered.
 - 10. A copy of each examination, quiz or evaluation administered during the course to include:
 - a. Student name,
 - b. Individual score,
 - c. Pass/fail criteria, and
 - d. Date administered.
 - 11. Copies of written agreements with facilities utilized by the course for fulfillment of clinical and/or field internship objectives,
 - 12. Documentation of the course physician approval of clinical preceptors and/or guest

- lecturers.
- 13. Documentation of clinical preceptor(s) orientation to the clinical objectives and student scope of practice,
- 14. Documentation demonstrating student achievement of all clinical and field internship objectives, and
- 15. Documentation recording the individual reasons that student(s) failed to complete the course of study.
- D. The course tracking number must be used on all documents, records and correspondence pertaining to the approved course. The course coordinator will submit the following records to the EMS Bureau via e-mail to EMSCourses@dhw.idaho.gov.
 - 1. A "Course Beginning Roster" submitted to the EMS Bureau within ten (10) days of the course beginning date along with proof of student prerequisites, and
 - 2. A "Course Completion Record" verified by the course coordinator and submitted to the EMS Bureau within ten (10) days of course completion and at least every thirty (30) days until all students are complete or incomplete.
 - a. All students listed on the "Course Beginning Roster" must also be listed on the "Course Completion Record."
 - b. Students will be listed as "complete", "incomplete" or "pending."
 - c. Paramedic students in process of completing field internships are to be marked as "pending."
 - d. Students who did not successfully complete the course must be appropriately noted.
 - 3. Optional Module Education Record must be reported to the EMS Bureau within ten (10) days of the student's completion
- E. The sponsoring entity will issue a course completion document to all students who comply with all EMS Bureau standards and all policies established by the course coordinator, and successfully complete the educational program. The course completion document issued to the student will include the following:
 - 1. Type of course,
 - 2. Level of course (EMR, EMT, AEMT, Paramedic),
 - 3. Name of the sponsoring entity,
 - 4. The full legal name of the student,
 - 5. The EMS Bureau course tracking number,
 - 6. Course completion date,
 - 7. Printed name and signature of the course coordinator,
 - 8. Printed name and signature of the primary instructor, and
 - 9. IEC and ISC AEMT and Paramedic course completion documents must contain the printed name and signature of the course physician.

V. Course Standards

All education will be consistent with the currently approved curriculum and the scope of practice as defined in the current EMS Physician Commission Standards Manual.

- A. The course coordinator and primary instructor must have attended an Instructor Orientation Course within the twenty-four (24) months preceding the course start date.
- B. The course coordinator, primary instructor, assistant instructor and course physician share in the responsibility to maintain education standards throughout the course.
- C. The primary instructor designated on the course application will direct and oversee all student instruction.
- D. All courses will contain not less than one (1) student who is not part of the teaching faculty.
- E. Students enrolled in initial courses are required to have a core text consistent with the objectives of the approved curriculum.
- F. The student to instructor ratio for skills instruction will be no greater than six to one (6:1).
- G. Education sessions should not exceed eight (8) hours within a twenty-four (24) hour period.
- H. ISC courses:
 - 1. The following are the recommended time allotments:
 - a. EMR 52 hours
 - b. AEMT 60 hours
 - c. Paramedic 1,000 hours
 - 2. The following courses must be a minimum of:
 - a. EMR to EMT Bridge 70 hours
 - b. EMT 110 hours
- I. The only eligible sponsoring entity for the EMR to EMT bridge course is an Idaho licensed EMS agency.
- J. All students enrolled in an initial course will receive an orientation to:
 - 1. The functional job position description no later than the second classroom session,
 - 2. Idaho's EMS licensure process,
 - 3. Idaho's certification examination process, and
 - 4. Idaho's Department of Health and Welfare Criminal History Background Check.
- K. All students enrolled in a transition course will receive an orientation to the new scope of practice.
- L. Students must complete all make-up and remediation education before the course completion date.

VI. Clinical/Hospital/Field Experience

The course coordinator will ensure sufficient clinical agreements are in place for students to accomplish their clinical, hospital and field experience prior to course completion. Clinical/Hospital/Field experience requirements are outlined in Appendix A.

VII. Changes to an Approved Course

- A. The following changes to an approved course require e-mail notification to the EMS Bureau within five days:
 - 1. Course coordinator,
 - 2. Course physician,
 - 3. Course instructor(s), or
 - 4. Course beginning or ending dates.
- B. Other changes require notification to the EMS Bureau prior to the course completion date.
- C. When changes occur, the EMS Bureau may require additional documentation regarding the circumstances resulting in the change. Changes in an approved course must be compliant with the EMS Education Standards Manual and approved curriculum.

VIII. Student Prerequisites

Students must meet prerequisites as listed below:

- A. EMR students have no prerequisites for the initial course.
- B. EMR to EMT Bridge students must possess current Idaho EMS licensure as an EMR.
- C. EMT students must have current CPR skills meeting current Emergency Cardiovascular Care (ECC) guidelines.
- D. AEMT students:
 - 1. Must have current CPR skills meeting current ECC guidelines, and
 - 2. Must possess current Idaho EMT licensure, or
 - 3. NREMT registration at the EMT level, or
 - 4. Other state certification/licensure at the EMT level.
- E. Paramedic students:
 - 1. Must have current CPR skills meeting current ECC guidelines, and
 - 2. Must possess current Idaho EMT licensure, or
 - 3. NREMT registration at the EMT level, or
 - 4. Other state certification/licensure at the EMT level, and
 - 5. Anatomy and Physiology according to the approved curriculum.

IX. Course Application & Record Submission Procedures

- A. The course coordinator should submit the completed application to the EMS Bureau via e-mail to EMSCourses@dhw.idaho.gov at least thirty (30) days in advance of the course beginning date.
- B. Course documents required for submission are provided to the course coordinator in conjunction

with the course approval.

C. Course Beginning Roster:

- 1. All information is required.
- 2. Roster must be submitted within ten (10) days of the first scheduled session.
- 3. Student prerequisites.

D. Course Completion Record:

- 1. All students listed on the Course Beginning Roster must be listed on the Course Completion Record with their final disposition appropriately noted on the document.
- 2. All portions of the Course Completion Record are required.
- 3. Paramedic students engaged in field internship may be reported as "pending."
- 4. The Course Completion Record must be submitted within ten (10) days of course conclusion, and at least every thirty (30) days until all students are complete or incomplete.

E. Optional Module Courses

- 1. The only eligible entities for OM approval are licensed EMS agencies.
- 2. Requirements for approval are:
 - a. Submission of patient care reports either directly to PERCS or through a validated software vendor
 - b. Submission of an addendum to the agency's medical supervision plan indicating
 - 1. How the medical director will ensure initial and ongoing competency of the EMS personnel
 - 2. Which OMs the medical director has authorized for the agency
 - c. Application to the EMS Bureau for any courses requiring state specified training
 - d. Completion and submission of the course beginning roster
 - e. Submission of proof of credentialing of personnel to the EMS Bureau once the educational component has been completing
- F. The course coordinator will submit the required documentation to the EMS Bureau via e-mail to EMSCourses@dhw.idaho.gov.
- G. EMS Bureau application review:
 - 1. The EMS Bureau will assign a unique number to each approved course. The course coordinator must use this number on all course documentation submitted to the EMS Bureau and on all required course records.
 - 2. The EMS Bureau will notify the course coordinator of course approval via e-mail with an Adobe PDF attachment. The PDF is a required course record and must be maintained by the course coordinator.
 - 3. The EMS Bureau will approve the course on NREMTs website after the course coordinator has entered the appropriate information and has submitted the beginning course roster.

X. Instructor Standards

An individual seeking approval as an Idaho EMS instructor will submit an instructor application to the EMS Bureau using the most current application, available at the EMS Bureau office or from the Idaho

EMS Bureau website (www.idahoems.org).

A. EMR Instructor Requirements:

1. Licensure at or above the EMR for a minimum of three (3) years, andCompletion of an Idaho EMS Bureau Instructor Orientation course within twenty-four (24) months of instructor application.

B. EMT Instructor Requirements:

- 1. Licensure requirements:
 - a. Licensure at or above the EMT level for a minimum of three (3) years, or b.Other licensed health care providers must have been licensed in their field for a minimum of three (3) years and also be licensed as an EMT.
- 2. Completion of an Idaho EMS Bureau Instructor Orientation course within twenty-four (24) months of instructor application, and
- 3. Successful completion of an Adult Instructional Methodology course (for approved Adult Instructional Methodology courses, see appendix B).
- 4. Individuals meeting the above requirements will also be approved to instruct at the EMR level.

C. AEMT Instructor Requirements:

- 1. Approval as an AEMT instructor is based on the submission of qualifying credentials, education or experience corresponding to the knowledge and skills objectives of the AEMT curriculum. To verify qualifications, candidates will submit the following documentation with their application:
 - a. Copies of
 - 1. All training certificates or diplomas specific to education or health care, or
 - 2. Length and type of certification for any health care provider level, and
 - b. Documentation of any prior teaching experience, and
 - c. Evidence of familiarity with the corresponding curriculum, and
 - d. A letter of recommendation from an agency medical director, agency administrator, or an instructor.
- 2. Completion of an Idaho EMS Bureau Instructor Orientation course within twenty-four (24) months of application, and
- 3. AEMT instructors will not be authorized to teach EMT or EMR students unless they meet those instructor requirements.

D. Paramedic Instructor Requirements:

- 1. Approval as a Paramedic instructor is based on the submission of qualifying credentials, education or experience corresponding to the knowledge and skills objectives of the Paramedic curriculum. To verify qualifications, candidates will submit the following documentation with their application:
 - a. Copies of
 - 1. All training certificates or diplomas specific to education or health care, or
 - 2. Length and type of certification for any health care provider level, and
 - b. Documentation of any prior teaching experience, and
 - c. Evidence of familiarity with the corresponding curriculum, and

- d. A letter of recommendation from an agency medical director, agency administrator, or an instructor.
- 2. Completion of an Idaho EMS Bureau Instructor Orientation course within twenty-four (24) months of application, and
- 3. Paramedic instructors will not be authorized to teach EMT or EMR students unless they meet those instructor requirements

E. Adult Instructional Methodology:

- 1. A listing of currently accepted instructor methodology courses is located in Appendix B of this manual.
- 2. An individual may submit documentation of other education, equivalent to the approved instructor methodology, for consideration in meeting this requirement. The documentation must include the following:
 - a. A copy of the course transcript or course completion certificate from the institution conducting the education, and
 - b. A copy of the learning objectives of the course for the following topics:
 - 1. The adult learner,
 - 2. Learning objectives,
 - 3. Learning process,
 - 4. Lesson plans,
 - 5. Course materials,
 - 6. Preparation,
 - 7. Teaching aids,
 - 8. Teaching methods, and
 - 9. Evaluations
 - c. Additional documentation as requested by the EMS Bureau to in order to compare the equivalency of the alternative Adult Instructional Methodology.

XI. IEC 2011 Instructor Requirements

An individual seeking approval as an IEC course instructor will submit an instructor application to the EMS Bureau using the most current application, available at the EMS Bureau office or from the Idaho EMS Bureau website (www.idahoems.org).

- A. Approved ISC instructors at the paramedic level may teach IEC level courses to EMRs, EMTs, and AEMTs, provided they meet all of the instructor requirements for the level being taught.
- B. If you are a currently approved ISC instructor at the EMR, EMT or AEMT levels, or you are a currently approved ISC instructor at the paramedic level who would like to teach paramedics, you must complete the following prior to being approved as a ISC course instructor:
 - 1. Successfully complete the IEC transition course for your current level of registration, licensure or certification, and
 - 2. Become registered, licensed or certified at the IEC level, and
 - 3. Knowledge and skills validation from the either the agency Medical Director or Course Physician.

C. If a person is not an approved instructor for the ISC they must meet the instructor approval requirements in "Section X" to teach the IEC.

XII. Educational Program Quality Assurance

The EMS Bureau staff or designee may monitor and evaluate educational courses, instructors and sponsoring entities for compliance with education standards.

- A. To ensure compliance, the EMS Bureau may audit any or all course records at any time.
- B. Evaluation may include but is not limited to the following:
 - 1. Sponsoring entity compliance with the educational standards,
 - 2. Course coordinator compliance with educational standards,
 - 3. Instructor performance evaluated by:
 - a. Students, using a standard evaluation tool provided by the EMS Bureau, and/or
 - b. Review of student performance on National Registry examinations or other course examinations.
 - 4. Course physician compliance with educational standards,
 - 5. A review of clinical sites and documentation demonstrating student achievement of clinical objectives,
 - 6. Appropriateness of clinical sites relative to the curricula,
 - 7. Inspection of the educational facility for compliance with educational standards,
 - 8. Inspection of educational equipment and training aids for suitability to the curricula, and
 - 9. A formal audit of any or all records for compliance with the educational standards.
- C. The EMS Bureau will review information obtained from evaluation and summary findings with the sponsoring entity, course coordinator, primary instructor and course physician as determined by the EMS Bureau.
- D. The EMS Bureau may make summaries of education program findings available to licensed EMS services and organizations sponsoring EMS educational programs.
- E. Inspections:
 - 1. The EMS Bureau is authorized to enter the training facility at reasonable times, for the purpose of assuring that the training program meets or exceeds the provisions of rule and standards.
 - 2. Planned Site Visits:
 - a. Required for:
 - 1. A new sponsoring entity, and
 - 2. All sponsoring entities every three years
 - b. Consists of assuring compliance with standards for:
 - 1. Facilities,
 - 2. Curriculum,
 - 3. Equipment,
 - 4. Physician oversight,
 - 5. Instructors, and

- 6. Course coordinators
- 3. Unplanned Site Visits:
 - a. Due to complaints or compliance questions, and
 - b. Consists of assuring compliance with standards for:
 - 1. Facilities,
 - 2. Curriculum,
 - 3. Equipment, and
 - 4. Instructors.
- 4. Course or Instructor Visits:
 - a. Can be planned or unplanned, and/or
 - b.Consist of assuring compliance with curriculum and instructor standards.

XII. Appendices

APPENDIX A – Advanced EMT ISC Clinical Rotation Objectives

The student shall demonstrate the ability to safely & successfully perform the following skills:

- A. Assist patients with medications
- B. Gain venous access in all age group patients
- C. Monitor blood glucose levels with use of automated devices or reagent strips
- D. Effectively ventilate un-intubated patients of all age groups
- E. Perform a comprehensive assessment on pediatric patients
- F. Perform a comprehensive assessment on adult patients
- G. Perform a comprehensive assessment on geriatric patients
- H. Perform a comprehensive assessment on obstetric patients
- I. Perform a comprehensive assessment on psychiatric patients
- J. Perform a comprehensive assessment, formulate and implement a treatment plan for patients with:
 - a. chest pain
 - b. dyspnea/respiratory distress
 - c. syncope
 - d. altered mental status
- K. Serve as a team leader in prehospital situations
- L. Comprehensive medical legal documentation relative to the Advanced EMT scope of practice.

APPENDIX B – Hospital/Clinical Experience for IEC Courses

The clinical facility must be:

- A. Consistent with the objectives of the approved curriculum, and
- B. Approved by the course physician.

EMT Hospital/Clinical Experience:

- A. The student MUST perform ten (10) patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc... or on standardized patients of clinical settings are not available.
- B. The student SHOULD observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care.

EMT Field Experience: The student MUST participate in and document patient contacts in a field experience approved by the medical director and program director.

AEMT Hospital/Clinical Experience:

- M. The student MUST demonstrate the ability to:
 - a. Safely administer medications (the student should safely, and while performing all steps of each procedure, properly administer medications at least 15 times to live patients),
 - b. Safely gain vascular access (the student should safely, and while performing all steps of each procedure, successfully access the venous circulation at least 25 times on live patients of various age groups),
 - c. Perform an adequate assessment and formulate and implement a treatment plan for patients with chest pain,
 - d. Perform an adequate assessment and formulate and implement a treatment plan for patients with respiratory distress,
 - e. Perform an adequate assessment and formulate and implement a treatment plan for patients with altered mental status, and
 - f. Perform an adequate assessment on pediatric, adult and geriatric patients.
- N. The student SHOULD demonstrate the ability to effectively ventilate unintubated patients of all age groups (the student should effectively, and while performing all steps of each procedure, ventilate least 20 live patients of various age groups).

<u>AEMT Field Experience</u>: The student MUST participate in and document team leadership in a field experience approved by the medical director and program director.

Paramedic Hospital/Clinical Experience:

- A. The student MUST demonstrate the ability to:
 - a. Safely administer medications at least 15 times to live patients,
 - b. Safely perform endotracheal intubation on at least 5 live patients,
 - c. Safely gain vascular access at least 25 times on live patients of various age groups,
 - d. Effectively ventilate unintubated patients of all age groups on at least 20 live patients of various age groups,
 - e. Perform a comprehensive assessment on pediatric patients on at least 30 (including newborns, infants, toddlers, and school age) pediatric patients,
 - f. Perform a comprehensive assessment on at least 50 adult patients,
 - g. Perform a comprehensive assessment on at least 30 geriatric patients,
 - h. Perform a comprehensive assessment on at least 10 obstetric patients,
 - i. Perform a comprehensive assessment on at least 40 trauma patients,
 - j. Perform a comprehensive assessment on at least 20 psychiatric patients,
 - k. Perform a comprehensive assessment, formulate and implement a treatment plan for at least 30 patients with chest pain,
 - 1. Perform a comprehensive assessment, formulate and implement a treatment plan for at least 20 adult patients and 8 pediatric patients (including infants, toddlers, and school age) with dyspnea/respiratory distress,
 - m. Perform a comprehensive assessment, formulate and implement a treatment plan for at least 10 patients with syncope,
 - n. Perform a comprehensive assessment, formulate and implement a treatment plan for at least 20 patients with abdominal complaints (abdominal pain, nausea/vomiting, GI bleeding, gynecological complaint, etc.), and
 - o. Perform a comprehensive assessment, formulate and implement a treatment plan for at least 20 patients with altered mental status.

<u>Paramedic Field Experience</u>: The student MUST demonstrate the ability to serve as a team leader in a variety of at least 50 prehospital emergency responses.

<u>APPENDIX C – Approved Adult Instructional Methodology Courses</u>

The following are EMS Bureau approved Adult Instructional Methodology courses:

- A. EMS Instructor Methodology Course: developed at College of Southern Idaho (CSI) and delivered through distributed learning from CSI or Lewis-Clark State College
- B. Instructional Presentation Skills: Emergency Management Institute sponsored by FEMA (must be G-265, not IS-265)
- C. Instructor Development Course: Self-Study Program for Short-Term Program Instructors (Idaho Vo-Ed)
- D. Instructor Development: Idaho Peace Officers Standards and Training Academy
- E. Fire Fighter Certification System, Fire Instructor I, II and III: Department of Defense
- F. Facilitative Instructor: National Wildfire Coordinating Group (M410)
- G. National Association of EMS Educators (NAEMSE) Instructor Course

<u>APPENDIX D – Candidate NREMT registration process</u>

Student Instructions for NREMT EdNet Registration:

- A. All students must register with the National Registry of EMTs (NREMT) in order to be eligible for, and apply to take, the National Registry exam.
- B. Students will need the "Course Tracking Number" provided by their course coordinator to register. The course tracking number is the same as "Education Program" item on the NREMT website. The Education Program number is the same as the Idaho Course Approval number.

Follow these easy steps 3 to 4 weeks in advance of when you plan to test. If you need additional assistance, please contact the NREMT at 614-888-4484.

Step 1: Create Your Account

- Go to www.nremt.org and click on 'Login' (found in the blue bar at the top of the home page).
- Click on 'Set Up New Account' and follow the instructions.

Step 2: Login

• After you have completed Step 1, follow the link and login with the username and password you created.

Step 3: Manage Your Account Information

• Complete all the information in the 'Personal Account Information' fields as prompted. The name you include in this area should be the same as what appears on your driver's license (or the ID you will present at the testing center), and is what will appear on your application, National Registry certificate and card upon successful completion of the examination.

Read this to avoid delay! Make sure the name you use to set up your account matches the name on your driver's license EXACTLY (or the ID you will present at the testing center) or you will be denied access to the testing center on the day of your exam!

Step 4: Create a New Application

- Click on 'Create a New Application' to apply to take your exam.
- Review the 'Personal Information Summary' if any items are incorrect, you can make corrections by clicking on 'Manage Account Information.'
- Select the application level you wish to complete.

Step 5: Pay Application Fee

• It is recommended that you pay your application fee at the time you complete your online application. However, if you choose, you may pay at a later date.

Read this to avoid delay! An Authorization to Test (ATT) Letter allowing you to schedule your exam will not be issued until payment has been received and all other verifications are complete.

• You can pay by credit/debit online or print a money order tracking slip for mailing your money order to the NREMT.

Step 6: Check to See if You Are Approved to Take Your Exam

• When all areas of the application process are completed and have been verified, you will see the

following link: 'Print ATT Letter.'

<u>Read this to avoid delay!</u> You will only see 'Print ATT Letter' when you have been verified to test! This link will not appear if the verification process is not yet complete!

- Monitor the progress of your application and watch for your Authorization to Test (ATT) Letter by going to the NREMT home page and logging in using your username and password.
- Click on 'Candidate Services.'
- Click on 'Application Status.'
- If you see 'Submitted' next to 'Course Completion Verification,' this means the NREMT has submitted your information to the program you indicated, and is waiting for authorization from the program indicating that you have completed the course.
- If you see the link 'Print ATT Letter,' click on the link.

Step 7: Print the ATT Letter to Schedule Your Exam

• Scroll down to see if the 'Print ATT Letter' appears.

Read this to avoid delay! Click on this link to print your ATT Letter. Print and follow the instructions in your ATT Letter.

Step 8: Call Pearson VUE to Schedule Your Exam

- Your ATT Letter will contain the Pearson VUE phone number to call to schedule your examination.
- Your ATT Letter will also include other important information, so read carefully!

Read this to avoid delay!

- You can reschedule your exam up to twenty-four (24) hours in advance by calling Pearson VUE at 1-866-673-6896 or visiting the Pearson VUE website. If you fail to appear for your exam, you will have to complete a new application and pay another application fee!
- Refunds cannot be issued for no-shows.
- If you arrive late for your exam, you may lose your appointment!

EMS Students:

Additional informational can be found on the NREMT instructional DVD. Ask your instructor for more information or visit the NREMT website at www.NREMT.org.

<u>APPENDIX E – Pearson Testing Centers in Idaho</u>

Boise, ID

Spectrum View Business Center 1951 South Saturn Way, Suite 200 Boise, ID 83709

Coeur d'Alene, ID

Nexus Training and Consulting, Inc. 175 W. Dalton Ave. Coeur d'Alene. ID 83815

Idaho Falls, ID

Eastern Idaho Technical College 1600 South 25 East Idaho Falls, ID 83404

Lewiston, ID

Lewis- Clark State College 500 8th Ave Center For New Directions Reid Centennial Hall Room 23 Lewiston, Idaho 83501

Pocatello, ID

Idaho State University, 1001 S. 8th Ave Gravely Hall South Side Room 351 Campus Box 8027 Pocatello, ID 83209

Twin Falls, ID

College of Southern Idaho 315 Falls Ave Meyerhoeffer/Library Bldg Campus Testing Center, Room 230 Twin Falls, ID 83301

<u>APPENDIX F – Minimum Educational Equipment for ISC Courses</u>

EMR Course Equipment

Manikins	Obstetrics Manikin(s)
Adult Airway Head(s)	CPR Manikin(s)
Pediatric Airway Head(s)	AED Manikin(s)
Airway	Suction Device(s) and supplies
Bag Valve Masks – Adult, Pediatric, Infant	 Functioning Suction Canister(s)
Oxygen Supplies	 Suction Tubing
Oxygen Tubing	 Rigid Suction Catheter(s)
 Non-Rebreather Masks – Adult and Pediatric 	 Soft Suction Catheters – assorted sizes
Nasal Cannulas – Adult and Pediatric	Mouth to Mask Device (Bag Valve Compliant)
Oropharyngeal Airways – All sizes	Oxygen Tank(s) and Regulator(s)
Body Isolation Supplies	Face Shields/Safety Glasses
Exam Gloves, all sizes (non-latex suggested)	Isolation Gowns
Cardiac Monitoring	AED Trainer w/pads and simulator
Obstetrics	Obstetrics Kit(s)
	(4)
Miscellaneous	Trauma Dressings – assorted sizes, types
Triangular Bandages	Sterile 4x4 Dressings
Trauma Shears	Alcohol/PVP Prep Pads
Hot and Cold Packs	Triage Tags
Disposable Burn Sheets	Tape – various sizes, assorted types
Penlights	Kerlix/Kling – various sizes
Irrigation Saline	Blood Pressure Cuff(s)
Adhesive Bandages	Stethoscope(s)
Airway Bag(s)	Teaching Stethoscope(s)
"Jump Kit(s)"	Stretcher(s)
Moulage Kit(s)	Stair Chair(s)
Pillows	Scoop Stretcher(s)
Blankets	Towels
Thermometer(s) – Not glass	

EMT Course Recommended Equipment + all of EMR equipment

Airway	Nasopharyngeal Airways – All sizes	
Immobilization/Extrication Supplies	C-Collars – All sizes adult and pediatric OR adjustable	
Cardboard, formable, or wire type splints	Cervical Immobilization Devices – assorted types	
Pelvic fracture splints	Long and Short Back Board(s)	
Traction Splints - assorted	Long Board Straps or Spider Straps	
Vacuum/Air Splints	Patient Restraints – assorted	

<u>Advanced EMT Course Recommended Equipment + all of EMR & EMT equipment</u>

Manikins	Difficult Airway Management Manikin(s)
Adult Intubation Head(s)	Infant/Pediatric IO Manikin(s)
Pediatric/Infant Intubation Head(s)	IV Arm
Airway	Dual Lumen Airway Devices
Ventilator Tubing	Esophageal Intubation Detectors
Intravenous Cannulation	IV Catheters – Assorted Sizes
Tourniquets/Restricting Bands	Syringes – Assorted Sizes
Tegaderm/Venaguard	Sharps Containers
IV Drip Sets – Micro and Macro	IV Solution – LR or NS
IV Drip Set Extensions	Saline Locks
3-way Stopcocks	Intraosseous Infusion (IO) Needles - Pediatric
Miscellaneous	Glucometer
Finger Lancets	Glucometer Test Strips

Paramedic Course Recommended Equipment + all of EMR, EMT, and AEMT Equipment

Manikins	Adult ALS Skills Manikin(s)
Human Patient Simulator – Adult	Pediatric ALS Manikin(s)
Pediatric Patient Simulator – Pediatric	Infant ALS Manikin(s)
Chest Decompression (NCD) Manikin(s)	Surgical/Needle Cricothyrotomy Manikin(s)
Airway	Surgical Cricothyrotomy Supplies
Transport Ventilators	Scalpels or Manufactured Emergency Cricothyrotomy
	Kit(s)
Intravenous Cannulation	Central Line Torsos
Thoracentesis (NCD) Supplies	Manufactured Emergency Thoracentesis Kit(s)
• 3" or longer IV catheters	IV Pumps
Heimlich Chest Drain Valve(s)	Blood Administration Sets
Cardiac Monitoring	EKG Rhythm Generator(s)
Cardiac Monitor(s) – must defibrillate, synchronized	Pacer pads/Defibrillator Pads (CombiPads) – Adult and
cardiovert, and transcutaneous pacing (TCP)	Pediatric
Electrodes – Adult and Pediatric	EKG Cables
EKG Paper	
Miscellaneous	Medications
End Tidal CO ₂ Capnography Monitor(s)	• Expired and drained vials, ampules, etc
Length/Weight Based Colormetric Measuring Tape	Manufactured "mock" medications

<u>APPENDIX G – Minimum Educational Equipment for IEC Programs</u>

EMR Course Equipment

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Adult Airway Head(s)	CPR/AED Manikin(s)
Pediatric Airway Head(s)	Obstetrics Manikin(s)

Airway

Oropharyngeal Airways – All sizes	Powered/Manual Suction Device(s) and supplies
Bag Valve Masks – Adult, Pediatric, Infant	 Functioning Suction Canister(s)
Oxygen Supplies	 Suction Tubing
Oxygen Tubing	 Rigid Suction Catheter(s)
 Non-Rebreather Masks – Adult and Pediatric 	 Soft Suction Catheters – assorted sizes
Nasal Cannulas – Adult and Pediatric	Mouth to Mask Device (Bag Valve Compliant)
Oxygen Tank(s) and Regulator(s)	

Body Isolation Supplies

	Exam Gloves, all sizes (non-latex suggested)	Face Shields/Safety Glasses
ı	Isolation Gowns	

Cardiovascular

AED Trainer w/pads and simulator

Obstetrics

Obstetrics Kit(s)

Miscellaneous

Thermometer(s) – not glass	Trauma Dressings – assorted sizes, types
Triangular Bandages	Sterile 4x4 Dressings
Trauma Shears	Alcohol/PVP Prep Pads
Hot and Cold Packs	Triage Tags
Disposable Burn Sheets	Tape – various sizes, assorted types
Penlights	Kerlix/Kling – various sizes
Irrigation Saline	Blood Pressure Cuff(s)
Adhesive Bandages	Stethoscope(s)
Airway Bag(s)	Teaching Stethoscope(s)
"Jump Kit(s)"	Stretcher(s)
Moulage Kit(s)	Stair Chair(s)
Pillows	Scoop Stretcher(s)
Blankets	Towels
Normal Saline for eye irrigation	

EMT Course Equipment (to include all EMR equipment)

Airway	
Nasopharyngeal Airways – Assorted sizes, to	Venturi Masks
include adult and pediatric	
Oxygen Powered Demand Valve	Humidifier
Automated Transport Ventilator	

Assorted extremity splints	Rigid Cervical Collars – All sizes adult and
	pediatric OR adjustable
Pelvic fracture splints	Long and Short Back Board(s)
Traction Splints - assorted	Long Board Straps or Spider Straps
Patient Restraints – assorted	KED or equivalent
Head Immobilization Devices – assorted types	

Miscellaneous

Glucometer Test Strips	Glucometer
Pulse Oximetry Device (with adult and pediatric	Finger Lancets
probes)	
CO Oximetry Device (with adult and pediatric	Magill Forceps
probes)	
Tourniquets	

AEMT Course Equipment (to include all EMR & EMT equipment)

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IV Arm	Infant/Pediatric ALS Skills Manikin
Adult Intubation Head(s)	Adult ALS Skills Manikin
Pediatric/Infant Intubation Head(s)	Infant/Pediatric IO Manikin(s)
Difficult Airway Management Manikin(s)	Adult IO Manikin

Airway

Esophageal Intubation Detectors	Blind Insertion Airway Devices
Ventilator Tubing	Capnometry
CPAP Equipment	Tracheobronchial Suctioning via Advanced Airway
Magill Forceps, Adult and Pediatric	

Intravenous Cannulation

Intraosseous Infusion (IO) Needles - Adult and	IV Catheters – Assorted Sizes
Pediatric	
Tourniquets/Restricting Bands	Syringes – Assorted Sizes
Tegaderm/Venaguard	Sharps Containers
IV Drip Sets – Micro and Macro	IV Solution – LR or NS
IV Drip Set Extensions	Saline Locks
Buretrol type IV sets	Alcohol/PVP Prep pads
Blood Administration Sets	3-way Stopcocks

Cardiovascular

Mechanical CPR Device

Medication Administration

Auto Injector Trainer	Simulations for:	
Inhaled Medication Administration Set	• ASA	
Nebulizer	• D50	
Metered Dose Inhaler Trainer	• EPI	
Medication Atomizer	• Glucagon	

Paramedic Course Required Equipment (to include all EMR, EMT, and AEMT equipment)

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Surgical/Needle Cricothyrotomy Manikin(s)	Human Patient Simulator – Pediatric
Human Patient Simulator – Adult	Chest Decompression (NCD) Manikin(s)
Central Line Torso(s)	

Airway

Scalpels or Manufactured Emergency	Endotracheal Tubes - Assorted sizes, cuffed and
Cricothyrotomy Kit(s)	uncuffed
Surgical Cricothyrotomy Supplies	Stylets, Adult and Pediatric
Large Bore Nebulized Oxygen Set	Laryngoscope Handles - Adult and Pediatric
Nasogastric Tubes	Laryngoscope Blades – Miller (straight) and
	McIntosh (curved) All sizes, 0-4
Humidifier	CPAP Circuits
Intranasal Administration Device(s)	Small Volume Nebulizers

Intravenous Cannulation

Blood Administration Sets	Central Line Torsos
Thoracentesis (NCD) Supplies	Manufactured Emergency Thoracentesis Kit(s)
• 3" or longer IV catheters	IV Pumps
Heimlich Chest Drain Valve(s)	Pressure Bags

Cardiac Monitoring

EKG Paper	EKG Rhythm Generator(s)
Cardiac Monitor(s) – must defibrillate,	Pacer pads/Defibrillator Pads (CombiPads) - Adult
synchronized cardiovert, and transcutaneous	and Pediatric
pacing (TCP), have 12 lead capabilities	
Electrodes – Adult and Pediatric	EKG Cables
Cardiac Monitor Batteries	

Miscellaneous

End Tidal CO ₂ Capnography Monitor(s)	Medications
Length/Weight Based Colormetric Measuring Tape	• Drained vials, ampules, etc
Pelvic Sling	 Manufactured "mock" medications
Broselow Bag(s)	Drug Bag(s)

Obstetrics

Meconium Aspirator(s)